



# **STRICTLY CONFIDENTIAL**

**SERIOUS CASE/LESSONS LEARNED REVIEW – (ABIGAIL)**

**EXECUTIVE SUMMARY**

**PREPARED FOR THE  
MEDWAY SAFEGUARDING CHILDREN BOARD**

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This report is the executive summary of the serious case review for Abigail and her family (all names have been changed). Abigail took a fatal overdose of prescription tablets. This was a tragic event and the panel who met to consider the contact Abigail and her family had with professionals would like to express their condolences to her family and all who knew her.

As Medway is a small community, many elements of Abigail's case, as it was reviewed, makes Abigail and her family easily identifiable. For this reason, it has been agreed that this executive summary contains only the themes, conclusions and recommendations made and agreed by Medway Safeguarding Children Board.

## 1. Themes, Conclusions and recommendations

This review has sought to understand the circumstances and life experience of Abigail before she died of a drug overdose. It is hard to disentangle all the influences on Abigail's life or to clearly understand exactly what led to her death. She was a young woman who had lived with adversity throughout her life, but only appeared to experience difficulties in her late adolescence. She had good friends and a part time job, but experienced depression, which appeared to respond to treatment. Over the Christmas period she appears to have become depressed again and in January took an overdose of drugs which ended her life.

### 1.1 Theme One: Risk Resilience and Vulnerability

Abigail and her siblings lived long term with their parent's mental health difficulties, alcohol and drug misuse and violence and conflict. Each of these circumstances has the potential to cause significant harm and poor developmental outcomes. It is unclear what the exact impact on these parents' capacity to parent was as this was never assessed. In these young people's early years their parents ensured the children attended all their necessary health appointments. They also all did well at school and were considered bright and Abigail had a good circle of friends. School appointments and open evenings were attended by one or both of the parents. The schools attended by Abigail and her siblings had only minor concerns about the quality of care they received.

It is important to consider the balance between risk and resilience in the lives of children and young people who live with adversity. For these young people the balance in the early years seems to be in the area of resilience and they had some of the key ingredients for resilience (Surviving difficult circumstances in childhood, Daniel et al 1999) such as good academic attainment and friendship networks. Their parents must also have contributed to this ability to cope with difficult circumstances.

Studies of resilience show that children and young people can be cushioned from the impact of adverse environments circumstances in the short term, but that it is the long term chronic experiences that causes long term harm, and that this harm can develop in adolescence and young adulthood (Daniel et al 1999) This certainly seems the case for Abigail and her brother.

In adolescence there is some evidence from school that Abigail started to experience difficulties and that she had begun to misuse alcohol. It is clear that one of the most profound impacts of living with all these parental issues is the impact on parent-child relationships and attachments, and although she had a good friendship network, she lacked a supportive relationship with her mother. This may have been important in her adolescence.

These young people seemed to have used school as a safe haven, and it was during school holidays, particularly Christmas, when difficulties would occur. This highlights the key role that schools play in addressing the impact of adverse circumstances on children's lives, but also the opportunity they have to alert professionals to changes in children's coping strategies through the use of the Common Assessment Framework.

It is important that professionals who come into contact with adolescents consider the potential long term cumulative impact of living with parental capacity issues, and that resilience shown in the early years may start to change and the balance shift from resilience to vulnerability. There also needs to be a recognition of the interactive nature of the potential harm caused by living with domestic abuse and parental conflict, parental mental ill health, and parental substance misuse. It is important that adolescent's needs are assessed in the context of their parental and family circumstances in the long term, a gap recognised by Brandon et al in their recent Biennial review (Brandon et al 2008).

### **Recommendations:**

The MSCB should consider developing guidance and training about the complex interplay of domestic abuse, parental drug and alcohol misuse and parental mental ill health.

The MSCB should develop guidance and training about resilience and vulnerability in adolescent's lives. This should focus on the challenges of adolescence balanced with an understanding of the long term impact of family history and the challenges to young people's resilience that this represents.

## **1.2 Theme Two: Think Family: Act Family**

The recent cabinet review of families at risk (The Cabinet Office 2006) challenges professionals across adult and children's services to consider the needs of the whole family group, and to move from an individualised understanding of people's difficulties to one which is focussed on the family's context. Each member of this family, apart from Abigail's sister, had contact with professionals about their own individual needs. The professionals they saw were committed to providing a good quality service to each individual, but did not consider their difficulties in the context of their family circumstances.

This lack of a "think family" approach was apparent in the care and treatment provided to Abigail's brother. A family centred approach might have helped professionals to contextualise the family pattern of using overdosing to cope with difficulties and prompted a more family oriented treatment approach.

It is important that all professionals in contact with adults with mental health and substance misuse difficulties, who are parents, consider the impact of these

difficulties on their ability to provide appropriate and safe care to their children and the potential impact of these adult difficulties on children's outcomes.

### **1.3 Theme three: Lack of action to effectively safeguard children and young people**

Over the years there were a number of missed opportunities to address the safeguarding needs of Abigail and her siblings. These ranged from direct allegations of the physical abuse of Abigail's brother by his father, the threatening of Abigail's and her siblings by their mother with a knife and Abigail's mother driving whilst drunk with the children. The police often considered that taking action to safeguard these children and young people was necessary by referring to Children's services, but there is no evidence that this ever happened. Professionals in adult psychiatry, hospital services and the GP did not seem to consider that any safeguarding action was necessary. The Judge who presided over the court case regarding the assault by Abigail's father of her mother did bring Abigail's circumstances to the attention of Children's services, but this got a confused response which led to no action. Overall the professionals in contact with this family demonstrated a serious lack of clarity about their safeguarding responsibilities. Many of these responses were historical and it is hoped that the response would now be different, however the lack of action by professionals continued in more recent times.

#### **Recommendation:**

The MSCB should remind all adult service providers of their safeguarding responsibilities and that they all have a responsibility to ensure that staff attend safeguarding training.

The MSCB should ensure that the generic Child Protection training addresses the risks of significant harm that living with parental substance misuse, parental mental ill health and domestic abuse and parental conflict, and that the co-existence of all of these factors is likely to increase risks.

### **1.4 Theme Four: Professional working in isolation; sharing of information**

All the professionals involved with Abigail and her family held information which was not shared with others. This lack of information sharing meant that Abigail's and her brother's difficulties were not considered holistically.

This case highlights the importance of information sharing across the network of people involved with this family. It was only when all the information from the different professionals came together for this review, that the seriousness of Abigail's circumstances became apparent. This case also highlights the importance of all

professionals making use of the Common Assessment Framework as a way of linking with other professionals and sharing information across the network.

**Recommendation:**

This serious case review could be used as a case example to remind all of the professionals across adults and children's services of their information sharing responsibilities and the consequences of the lack of effective information sharing.

**1.5 Theme Five: The management of adolescent depression**

The treatment of Abigail's depression was not influenced by existing guidance on the treatment of adolescent depression. This led to a lack of focus on her family circumstances, the inappropriate prescribing of Citalopram, the lack of close monitoring of the impact of medication and the lack of direct assessment of her suicidal ideation. The treatment she received did have a positive impact and the last time she saw the GP she was feeling better and indicated that she had no suicidal thoughts.

There was some confusion about what services there were to address the mental health needs of young people with depression. This is consistent with the most recent review of serious case reviews carried out by Brandon and colleagues where they found that CAMHS needed to be more accessible and address the needs of adolescents more clearly. The GP also lacked information about what services were available to adolescents with mental health difficulties in Medway

**Recommendation:**

The MSCB should endorse NICE guidelines 'Depression in Children and Young People' and ensure that policies are updated in line with the findings and it should be promoted in relevant training.

In order to achieve a swift and appropriate response to young people's mental health needs a single point of referral to CAMHS/CAST needs to be developed. This requires planning between the commissioners and providers of those services.

**1.6 Theme six: the misuse of prescription drugs**

There is growing recognition that the misuse of prescription drugs, rather than illegal drugs, is a developing problem (Children and Young People June 2009 <http://www.cypnow.co.uk/bulletins/Daily-Bulletin/inDepth/>). In Abigail's circumstances her parent's attitude to prescription drug misuse was not considered in the context of her or her brother treatment and action was not taken about Abigail's fathers buying of drugs for himself and his family.

**Recommendation:**

The health authority should develop guidance about the actions to be taken regarding serious prescription drug misuse

The MSCB should alert GOSE that the misuse of prescribed medication (and the implications for the safeguarding of children and young people) is an issue of national concerns which requires urgent attention.

## 2.0 References

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